

Applicant or Pat ntee: LINK, Charles J., Jr. et al.

Serial No. or Patent No: TBA

Filed or Issued: June 7, 2000

For: METHOD FOR TUMOR TREATMENT USING INFUSION OF XENOGENEIC CELLS TO INDUCE HYPERACUTE REJECTION AND INNOCENT BYSTANDER EFFECT

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
37 CFR 1.9(f) AND 1.27(d) - NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION Human Gene Therapy Research Institute

ADDRESS OF ORGANIZATION Iowa Methodist Medical Center, 1415 Woodland Street, Des Moines, Iowa 50309

TYPE OF ORGANIZATION

☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION

☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c)(3))

☒ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE

UNITED STATES OF AMERICA

(NAME OF STATE Iowa)

(CITATION OF STATUTE _____)

☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE

(26 USC 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA

☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE
OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA

(NAME OF STATE _____)

(CITATION OF STATUTE _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled METHOD FOR TUMOR TREATMENT USING INFUSION OF XENOGENEIC CELLS TO INDUCE HYPERACUTE REJECTION AND INNOCENT BYSTANDER EFFECT by inventor(s) Charles J. Link, Jr. and Tatiana Seragina as described in

☒ the specification filed herewith.

☐ application serial no. _____, filed _____

☐ patent no. _____, issued _____

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

FULL NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of payment, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Charles J. Link, Jr.

TITLE IN ORGANIZATION Director, Human Gene Therapy Research Institute

ADDRESS OF PERSON SIGNING Iowa Methodist Medical Center, 1415 Woodland Street, Des Moines, Iowa 50309

SIGNATURE Charles J. Link, Jr. DATE June 7, 2000